

Recent emerging gut microbiome management modalities in acute diarrheain children: (a comparative study review of different probiotic strains) an update!

Said M. M. El Deib

The National Egyptian Institute of Diabetes & Endocrine Diseases, Egypt

Abstract

Introduction: Acute Diarrheal Diseases considered as the most common leading causes of children mortality all over the globe. Today, only 39 per cent of children with Diarrhea in developing countries receive the recommended treatment, and limited trend data suggest that there has been little progress since 2000, more than 386000 children dies in India only due to A. Diarrhea every year. An international commitment to tackle childhood Diarrhea in the 1970s and 1980s resulted in a major reduction in child deaths. This came about largely through the scaling up of oral rehydration therapy, coupled with programs to educate caregivers on its appropriate use. But these efforts lost momentum as the world turned its attention to other global emergencies. Our review aims to search & updates the Evidence Based Review Articles that study the use of specific probiotic strains, namely *Lactobacillus rhamnosus* GG (LGG) and *Saccharomyces boulardii*, for the management of children with acute gastroenteritis (AGE) as an adjunct to rehydration therapy.

This Literature Review also aim to show us the role of different probiotics in the treatment of acute diarrhea in children. "Probiotics may be an effective adjunct to the management of diarrhea". *L. rhamnosus* GG (LGG) significantly reduced duration of diarrhea, daily stool outputs, improved stool consistency and reduced no. of hospitalization and fever in children compared to other probiotics (*B. clausii* and *S. boulardii*) & ORS group as we will discuss now. The guidelines recommend the use of the specific probiotic strains, namely *Lactobacillus rhamnosus* GG (LGG) and *Saccharomyces boulardii*, for the management of children with acute gastroenteritis (AGE) as an adjunct to rehydration therapy.

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Biography

Dr. Said is a Pediatrician and Neonatologist whose experience in the field spans 15 years, backed by a higher education degree from royal college of pediatrics' and child health in UK, in addition to master degree from Ain Shams university in Egypt one of the oldest and top ranking universities in the MENA region. He is pioneering an open and contextual evaluation model based on constructive

responses, which has led in the creation of new methods to improve pediatric healthcare, neonatology and pediatric nutrition. Dr. Said has established this model following his years of experiences in medical practice, research and evaluation, and teaching and administration in hospitals and medical universities in the region, including Egypt.